Combined Declaration For Patent Application and Power of Attorney						ATTORNEY DOCKET 82221RLO						
As below named invent	or, I hereby decla	re that:										
My residence, post office address a												
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed												
below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
METHOD FOR CUST	FOMIZINO 1	G PROGRA	ΜV	IABLE CD-ROM	[
The specification of which (check	only one item be	low):										
is attached hereto.												
was filed as United States Application Serial No. on and was amended on (if applicable).												
was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable).												
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment												
referred to above. I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title												
37, Code of Federal Regulations, §1.56.												
I hereby claim foreign priority ben	efits under Title	35, United States C	ode,	§119 of any foreign application	ation(s) for	patent or	inventor's co	ertificate	or of any			
PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any												
foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:												
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND	ANY PRIORITY	CLA	IMS UNDER 35 U.S.C.	119:		, ,					
COUNTRY	AP	PLICATION NUMBER		DATE OF FILING			PRIORITY CLAIMED U	NDER 35 USC	§119			
(if PCT, indicate PCT)				(day month year)			YES		NO			
							YES		NO			
						 	YES		NO			
							J					
I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below:												
PRIOR PROVISIONAL APPLIC		D ANY PRIORITY	CLA	AIMS UNDER 35 U.S.C.	§119 (e):							
PROVISIONAL API	PLICATION NUMBER		1-		FILING	AIC	200 Jan 2					
					12	-(-) T	CT intermed	ional am	-lication(a)			
I hereby claim the benefit unde designating the United States of A in that/those prior applications(s) Trademark Office all information available between the filing date of	America that is/ard in the manner properties to known to me to	e listed below and, ovided by the first p be material to pate	ınsof parag entab	ar as the subject matter of e raph of Title 35, §112, I ac ility as defined in Title 37,	each of the calculation in the c	claims of the duty ederal Re	this applicate to disclose to disclose to the second street to the second street the second s	tion is no to the U.	ot disclosed S. Patent &			
PRIOR US APPLICATIONS O	R PCT INTERN	ATIONAL APPLI	CAT	IONS DESIGNATING TH	IE U.S FO	R BENE	FIT UNDER	₹				
35USC§120:	IIS ADDI	ICATIONS			T	ST	ATUS (Check o	one)				
U.S. APPLICATIONS U.S. APPLICATION NUMBER			IS FI	FILING DATE PATENTED			PENDING ABANDONED					
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PC	T APPLICATIONS D	ESIGNATING THE U.S		N. N								
PCT APPLICATION NO. PCT FILIN		ING DATE		U.S. SERIAL NUMBERS ASSIGNED (if any)								
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	mbined De	claration For Patent Applicati	ATTORNEY DOCKET 82221RLO			
ag th	gent(s) as	ssociated with Eastma eation and transact all	n Kodal	I inventor, I hereby appoint inventor, I hereby appoint in the Patent and Trade	o. 01333 to prosecute	
Se	nd Corresp	ondence to:			Direct Telephone Calls to:	
Patent Legal S				aff	(name and telephone number)	
		Eastma	Daymand I. Ower			
343 State Street Rochester, NY 14650-2201					Raymond L. Owens	
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3	BUSINESS ADDRESS	BUSINESS ADDRESS		СПҮ	STATE & ZIP CODE (COUNTRY)	
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4	ADDRESS			FIRST GIVEN NAME	SECOND GIVEN NAME	
2	FULL NAME OF INVENTOR	FAMILY NAME		<u> </u>		
۱٥	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
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2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME	
۰	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
6	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)	
I ho true imp app	ereby declare e; and furthe prisonment, o	er that these statements were mader both, under section 1001 of Titlery patent issuing thereon.	le with the e 18 of the	knowledge that willful false statement	s made on information and belief are believed to sand the like so made are punishable by final false statements may jeopardize the validity of SIGNATURE OF INVENTOR 203	
Kowan & Klam						
DA'	1/31/	01	DATE		DATE	
-:-	NATURE OF IN	IVENTOR 204	SIGNATUR	E OF INVENTOR 205	SIGNATURE OF INVENTOR 206	

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